United Nations DP/FPA/CPD/GTM/7

Executive Board of the United Nations Development Programme, the United Nations Population Fund and the United Nations Office for Project Services

Distr.: General
8 July 2014

Original: English

Second regular session 2014
2 to 5 September 2014, New York
Item 8 of the agenda
UNFPA – Country programmes and related matters

UNITED NATIONS POPULATION FUND

Country programme document for Guatemala

Proposed indicative UNFPA assistance:	$20.0 million: $8,5 million from regular resources and $11.5 million through co-financing modalities and/or other, including regular resources
Programme period:	Five years (2015-2019)
Cycle of assistance:	Seventh
Category per decision 2013/31:	Orange

Proposed indicative assistance by core programme area (in millions of $):

Strategic plan outcome area		Regular resources	Other	Total
Outcome 1	Sexual and reproductive health	1.6	7.2	8.8
Outcome 2	Adolescents and youth	2.4	1.1	3.5
Outcome 3	Gender equality and women's empowerment	1.4	3.0	4.4
Outcome 4	Population dynamics	1.9	0.2	2.1
	Programme coordination and assistance	1.2	-	1.2
	Total	**8.5**	**11.5**	**20.0**

14-57111 (E) 170714

Please recycle

I. Situation analysis

1. Guatemala faces a number of economic and population challenges. Although it achieved an average annual economic growth rate of 3.5 per cent over the past three years, the country is at the lower end of the UNDP human development index (0.581). Moreover, Guatemala has one of the highest levels of inequality in the world (Gini coefficient of 0.537).

2. Over 54 per cent of the population lives in poverty, rising to 73 per cent among the 40 per cent of the population identified as indigenous. The estimated annual population growth rate stands at 2.4 per cent (although no census was conducted in the latest 2010 round). The population is estimated to reach 16.3 million by 2015, with 68 per cent under the age of 30 years and 29 per cent aged 15-29 years.

3. These trends, informing a demographic dividend and increased investment in youth, offer Guatemala a unique opportunity to reduce poverty and inequality. However, the availability of disaggregated socio-demographic data and evidence for public policy formulation and monitoring remains limited.

4. The total fertility rate is 3.6 children per woman, rising to 5.7 children per woman among the lowest wealth quintile and dropping to 1.8 children per woman among the wealthiest. The adolescent fertility rate (98 per 1,000 women aged 15-19 years) is among the highest in the region; girls under the age of 19 years account for 22 per cent of all births. In 2012, some 3,014 births were registered for girls under 15 years of age (considered victims of sexual violence) while 81,661 births were among adolescents aged 15-19 years.

5. Maternal mortality has declined slightly, from 153 deaths per 100,000 live births in 2000 to 140 per 100,000 live births in 2007. However, large disparities persist, with the maternal mortality ratio rising to 219 per 100,000 live births among girls under 15 years and more than doubling among indigenous women. Traditional birth attendants still deliver 41 per cent of all births, with an estimated neonatal mortality rate of 18 per 1,000 live births, while 49 per cent of children under the age of 5 years suffer from chronic malnutrition.

6. The contraceptive prevalence rate for women using modern methods of birth control is 44 per cent; the unmet need for family planning is an estimated 20.8 per cent and double that figure for indigenous women. The HIV prevalence is estimated to rise to 0.89 per cent by 2015, with most new cases expected among girls aged 10-14 years and young women aged 15-24 years.

7. Guatemala is vulnerable to natural disasters; in 2012, the country ranked fourth out of 173 countries on the World Risk Index. By 2015, an estimated 63.7 per cent of the population will be living in urban areas. Insufficient urban planning, persistent poverty and high-risk exposure to hazards increase vulnerabilities, especially of the most excluded populations. Guatemala is plagued with high levels of conflict, ranking 109th out of 158 nations, according to data provided by the Global Peace Index (2013).

8. Social spending on health and education in Guatemala was 1.8 per cent and 3.8 per cent, respectively, of the gross domestic product in 2012. National curricula include a comprehensive

sexuality education, along with the development of a strategy, but implementation in schools remains a challenge. The country has not ratified the Ibero-American Convention on Youth Rights and does not have youth-specific legislation.

9. Violence against women is a major concern. In 2010, over 42 per cent of women had experienced verbal abuse while one in four women (24.5 per cent) suffered physical violence and one in eight women (12.3 per cent), sexual violence by their partners. Almost 60 per cent of all sexual violence complaints are lodged by girls aged 10-19 years. The number of female homicides has also increased, from 708 in 2012 to 758 in 2013.

II. Past cooperation and lessons learned

10. Under the previous country programme (2010-2014), UNFPA contributed to the reduction of poverty and inequality, addressing health and reproductive rights, supporting access to sexual and reproductive health services for youth and comprehensive sexuality education and advocating the inclusion of population dynamics into national planning and policy formulation.

11. The final evaluation of the country programme in 2014 revealed the following achievements: (a) strengthened national capacity to develop strategies, plans and guidelines on sexual reproductive health, HIV prevention, comprehensive sexuality education, prevention of adolescent pregnancy; (b) enhanced national capacity for reproductive health commodity security; (c) strengthened national mechanisms to address the concerns of women, youth and adolescent girls. Through the Opening Opportunities programme, UNFPA has helped to improve the lives of over 3,500 indigenous girls, and is advocating for the Government to scale up the programme and to adopt a girls-centred approach as part of the global Adolescent Girls Initiative; (d) strengthened comprehensive care models to address gender-based violence and enhance specialized justice models, in seven departments, to investigate the homicides of women.

12. The final evaluation made a number of recommendations: (a) continue providing technical assistance to the Ministries of health and education to strengthen their capacity to implement legal frameworks to scale up access for adolescents and youth to sexual and reproductive health services and comprehensive sexuality education; (b) generate knowledge and evidence on adolescent pregnancies, child marriage and population dynamics in support of public policies and planning processes; (c) scale up strategies on family planning, maternal mortality and adolescent girls; (d) foster dialogue and advocacy to strengthen strategic partnerships and mechanisms between the State and civil society to promote the agenda of the International Conference on Population and Development (ICPD) at national and local levels; (d) continue strengthening the role of civil society organizations and youth networks to increase their participation in accountability mechanisms to monitor fulfilment of sexual and reproductive rights.

III. Proposed programme

13. The proposed programme, designed in consultation with the Government, civil society, academia, United Nations organisations and donors, is aligned with the priorities of the National Plan 'K´atun, Our Guatemala 2032', the United Nations Development Assistance Framework (UNDAF) 2015-2019, the ICPD Programme of Action, and the UNFPA Strategic Plan, 2014-2017.

14. The programme contributes to the UNDAF outcome on increased access of priority populations as rights holders to comprehensive high-quality health services with equity and a cultural approach. The programme will focus on women and youth, including girls and adolescents, and concentrate its efforts on supporting the duty bearers, particularly the Government and civil society, to achieve universal access to sexual and reproductive health and rights, and on reducing maternal mortality in order to accelerate progress towards achievement of Millennium Development Goal 5.

15. The programme will utilize a set of strategies: advocacy and policy dialogue; knowledge management; and capacity development. These strategies will adopt human rights-based, culturally sensitive approaches supporting gender equality; a territorial perspective will be incorporated; and a cross-cutting focus on HIV will be mainstreamed across sexual and reproductive health, sexuality education and sexual violence.

Outcome 1: Sexual and reproductive health

16. Output 1. Strengthened national and local government capacity to provide comprehensive and differentiated sexual and reproductive health services for adolescent girls and young people, with a focus on human rights and a culturally sensitive approach. UNFPA will achieve this output by providing technical assistance: (a) for the development of operational guidelines for a more effective implementation of the regulatory framework of sexual and reproductive health for young people and adolescents (b) for the development of integrated governmental and non-governmental programmes to prevent unwanted pregnancies and provide care and protection to adolescent girls, placing them at the centre of development and ensuring compliance with their human rights.

17. Output 2. Strengthened national and local capacity of government institutions and civil society organizations to increase demand for and supply of family planning services, with a focus on adolescents and youth. UNFPA will achieve this output by: (a) fostering policy dialogue with national stakeholders; (b) developing advocacy capacities of civil society organizations and inter-institutional coordination mechanisms to demand, monitor and perform social audits of access to family planning services; (c) providing technical assistance and capacity development to the Ministry of Health for the development and implementation of a national strategy for family planning, which includes funding, diversification and continuous distribution of family-planning methods, and inter-institutional coordination with other national bodies.

18. Output 3. Strengthened national and subnational government capacity to provide comprehensive maternal and neonatal health care services and surveillance. UNFPA will achieve this output through the provision of: (a) technical and financial support to the Ministry of Public Health and Social Assistance to: (i) develop and start implementing an educational programme to train midwife professionals at universities; (ii) provide integrated basic and essential obstetric and neonatal care services, particularly in departments with high maternal mortality ratios; and (b) develop capacities of service providers to implement the Minimum Initial Service Package for reproductive health in crisis situations.

Outcome 2: Adolescents and youth

19. Output 1: Strengthened capacity of governmental and non-governmental organizations to design and implement school and community-based comprehensive sexuality education, using gender and inter-cultural approaches, in formal, extracurricular and non-formal education. UNFPA will achieve this output through: (a) provision of technical assistance and capacity development to the Ministry of Education for the implementation of the comprehensive sexuality education strategy in schools, and the development of plans and programmes on formal and extracurricular education; and (b) advocacy and technical assistance for the development and implementation of comprehensive sexuality education in non-formal educational settings.

20. Output 2: Strengthened national capacity of governmental and non governmental organizations to demand, design, advocate and implement legal frameworks, policies and programmes promoting the rights of young people and adolescent girls to leadership and participation and preventing early marriage. UNFPA will achieve this output through: (a) capacity development of young leaders to actively participate in advocacy and policy dialogue; (b) provision of technical assistance and advocacy to establish young people's coordination and participation mechanisms; (c) advocacy and policy dialogue for the development of a legal framework on youth; (d) generation of knowledge on the situation, causes, consequences and social determinants of early marriage; (e) advocacy, policy dialogue and technical assistance to scale up the indigenous girl initiative Opening Opportunities, and to advocate for its adoption by Government.

Outcome 3: Gender equality and women's empowerment

21. Output 1: Strengthened national and subnational capacity of government institutions and civil society organizations for the empowerment of women, girls and adolescents to exercise their sexual and reproductive rights and to prevent, protect and respond to gender-based violence, including sexual violence and in humanitarian settings. UNFPA will achieve this output through: (a) development of capacities of and advocacy among government and civil society organizations to monitor and implement recommendations on human rights, with emphasis on sexual and reproductive rights and HIV; (b) advocacy and technical assistance to foster strategic partnerships among civil society organizations to demand women's sexual and reproductive rights; and (c) technical assistance and capacity development to enhance an integrated system of prevention, protection and response to gender-based violence, with an emphasis on sexual violence, which will include disaster preparedness and humanitarian response.

Outcome 4: Population dynamics

22. Output 1: Strengthened government capacity to collect, generate, analyse and disseminate disaggregated socio-demographic information on population dynamics, sexual and reproductive health, HIV and violence against women, to be incorporated into the national planning system and policy formulation. UNFPA will achieve this output through (a) advocacy and capacity development to produce, analyse and utilize data, disaggregated by age, ethnicity and territory, to incorporate them into the planning system and national and local policies; and (b) technical assistance to partners to generate knowledge on population dynamics and the demographic dividend.

Programme management, monitoring and evaluation

23. UNFPA and the Government of Guatemala, through the Presidential Secretariat for Planning and Programming (SEGEPLAN), will be jointly responsible for the management and monitoring of the country programme. National execution is the preferred implementation arrangement. The two partners will plan, monitor and evaluate programme implementation following UNFPA guidelines and procedures, using results-based management approaches and accountability frameworks.

24. UNFPA will develop resource mobilization and partnership strategies to leverage resources and engage with international donors, civil society partners and the private sector towards achievement of the intended results.

25. The country office includes staff funded by the institutional budget for management and development effectiveness functions. UNFPA will allocateprogramme funds to ensure adequate staff capacity to provide technical and programmatic expertise.

26. The country office will seek technical support, including through South-South cooperation, from the regional office for Latin America and the Caribbean and UNFPA headquarters. The programme will use national, regional or international expertise, as required.In the event of an emergency, UNFPA may, in consultation with the Government, reprogramme activities, especially life-saving measures.

RESULTS AND RESOURCES FRAMEWORK FOR GUATEMALA, 2015-2019

National priority: National Development Plan K´atun Our Guatemala 2032: State guarantees human rights, development and welfare for the people.
UNDAF outcome: Priority populations have increased access to and use of comprehensive high-quality health services with cultural pertinence and equity.

UNFPA strategic plan outcome	Country programme outputs	Output indicators, baselines and targets	Partners	Indicative resources
Outcome 1: Sexual and reproductive health (Increased availability and use of integrated sexual and reproductive health services, including family planning, maternal health and HIV, that are gender-responsive and meet human rights standards for quality of care and equity in access) Outcome indicators: • Prevalence of use of modern contraceptive methods Baseline: 44%; Target: 54% • Percentage of births attended by skilled staff. Baseline: 51.5%; Target: 61% • Percentage of women aged 15-24 years who had sex in the last 30 days and used a condom. Baseline: 8.5%; Target: 11%	Output 1: Strengthened national and local government capacity to provide comprehensive and differentiated sexual and reproductive health services for adolescent girls and young people, with a focus on human rights and a culturally sensitive approach.	Output indicators: • Number of health institutions that implement operational guidelines developed with UNFPA support for comprehensive care services for adolescents and young people at the municipal level. Baseline: 0; Target: 85 • Number national programmes supported by UNFPA for the prevention of teenage pregnancies. Baseline: 2; Target: 2	Ministry of Public Health and Social Assistance; Secretary against Sexual Violence, Human Exploitation and Trafficking; National Youth Council; Civil society and community-based organizations; civil society observatories on sexual and reproductive health and rights.	$1.0 million (0.6 million from regular resources and $0.4 millions from other resources)
	Output 2: Strengthened national and local capacity of government institutions and civil society organizations to increase demand for and supply of family planning services, with a focus on adolescents and youth.	Output indicators: • Number of women and youth civil society organizations supported by UNFPA that promote women and young people´s rights and demand quality family planning services. Baseline: 2; Target: 5 • Percentage of health services that continuously provide with UNFPA support at least three modern methods of family planning, in compliance with national regulations. Baseline: 0%; Target: 60%		$6.5 million (0.5 million from regular resources and $6.0 million from other resources)
	Output 3: Strengthened national and subnational government capacity to provide comprehensive maternal and neonatal health care services and surveillance.	Output indicators: • A new educational programme designed and implemented with UNFPA support to train university midwife technicians Baseline: No; Target: Yes • Number of health services supported by UNFPA that implement basic and essential obstetric care, in three health areas Baseline: Basic Obstetric Care: 0 Essential Obstetric Care: 0; Target: Basic Obstetric Care: 32 Essential Obstetric Care: 5 • Number of health areas trained enabled to implement the Minimum Initial Services Package Baseline: 0; Target: 3 • Number of health areas supported by UNFPA that report to the national maternal mortality surveillance system. Baseline: 0; Target: 3		$1.2 million (0.4 million from regular resources and $0.8 million from other resources)
National priority: National Development Plan K´atun Our Guatemala 2032: State guarantees human rights, development and welfare for the people. **UNDAF outcome**: Increased access and use by priority populations of comprehensive high-quality health services with cultural pertinence and equity.				
Outcome 2: Adolescents and youth (Increased priority on adolescents, especially on very young adolescent girls, in national development policies and programmes, particularly increased availability of comprehensive sexuality education and sexual and	Output 1: Strengthened capacity of governmental and non-governmental organizations to design and implement school and community based comprehensive sexuality education, using gender and inter-cultural approaches, in formal, extracurricular, and non-formal education.	Output indicators: • Number of school and out-of-school plans in comprehensive sexuality education implemented with the support of UNFPA at national and local levels. Baseline: 1; Target: 5 • Number of UNFPA-supported institutions that implement comprehensive sexuality education in schools. Baseline: 0; Target: 500	Ministry of Education; Ministry of Social Development; University of San Carlos of Guatemala; Guatemalan Institute of Radiophonic Schools;	$3.5 million (1.0 million from regular resources and $0.5 million from other resources)

reproductive health) Outcome indicators: • Percentage of young women and men aged 15-24 years who correctly identify ways of preventing the sexual transmission of HIV and reject major misconceptions about HIV transmission Baseline: Women: 21.8% Men: 24.4%; Target: Women: 26% Men 30%	Output 2: Strengthened national capacity of governmental and non governmental organizations to demand, design, advocate for and implement legal frameworks, policies and programmes in favour of the rights of young people and adolescent girls to promote leadership, participation, and to prevent early marriage.	Output indicators: • Number of programmes to prevent early marriage focused on the rights of adolescent indigenous and marginalized girls implemented with support of UNFPA, within the framework of the Adolescent Girls Initiative; Baseline: 1; Target: 2 • Number of youth leadership programmes designed and implemented for young leaders to engage in advocacy and coordination mechanisms to demand the inclusion of their sexual and reproductive rights into laws, policies and national programmes. Baseline: 1; Target: 2	Literacy Committee; Population Council; Social Development Cabinet; civil society organizations; and academia	$3.5 million (1.4 million from regular resources and $0.6 million from other resources)
National priority: National Development Plan K'atun Our Guatemala 2032: State guarantees human rights, development and welfare for the people. **UNDAF outcome**: Increased access and use by priority populations of comprehensive high-quality health services with cultural pertinence and equity.				
Outcome 3: Gender equality and women's empowerment (Advanced gender equality, women's and girls' empowerment, and reproductive rights, including for the most vulnerable and marginalized women, adolescents and youth) • Outcome indicators: Proportion of women aged 15-49 years who believe a husband/partner is justified in hitting or punishing his wife/partner under certain conditions. Baseline: 6.7%; Target: 3%	Output 1: Strengthened national and subnational capacity of government institutions and civil society organizations for the empowerment of women, girls and adolescents to exercise their sexual and reproductive rights and to prevent, protect and respond to gender-based violence, including sexual violence and in humanitarian settings.	Output indicators: • Number of national government institutions enabled to monitor compliance of the sexual and reproductive rights of women, girls and adolescents. Baseline: 0; Target: 3 • Number of institutions participating in an integrated system for the prevention, protection and response to gender-based violence, including sexual violence. Baseline: 0; Target: 4 • Number of national and subnational civil society organizations supported by UNFPA that are engaged in the implementation of social audit plans to demand sexual and reproductive rights. Baseline: 0; Target: 5	Ombudsman Office; Women Presidential Secretary; Office for the Defence of Indigenous Women; Secretary against Sexual Violence, Exploitation and Trafficking; Judicial Court; Ministry of Interior; civil society; community-based organizations; observatories	$4.7 million (1.7 million from regular resources and $3.0 million from other resources)
National priority: National Development Plan K'atun Our Guatemala 2032: State guarantees Human Rights and Development and Welfare for people. **UNDAF outcome**: Priority populations have increased access to and use of comprehensive high-quality health services with cultural pertinence and equity.				

Outcome 4: Population dynamics (Strengthened national policies and international development agendas through integration of evidence-based analysis on population dynamics and their links to sustainable development, sexual and reproductive health and reproductive rights, HIV and gender equality) Outcome indicators: • Number of household surveys that allow estimations of key indicators of population and reproductive health (in the last 5 years) Baseline: 4; Target: 1	Output 1: Strengthened government capacity to collect, generate, analyse and disseminate disaggregated socio-demographic information on population dynamics, sexual and reproductive health, HIV, and violence against women, to be incorporated into the national planning system and policy formulation.	Output indicators: • Number of institutions supported by UNFPA that produce, analyse or incorporate statistical information on sexual and reproductive health, HIV and violence against women disaggregated by age, ethnicity, gender and territories Baseline: 2; Target: 5 • Number of studies on population dynamics and the demographic dividend supported by UNFPA that promote the incorporation of these approaches into national planning and policies. Baseline: 0; Target: 2 • Number of civil society or academic organizations supported by UNFPA that are engaged in the implementation of advocacy plans to demand updated population data and their integration into national policies and planning processes. Baseline: 0; Target: 2	National Institute of Statistics; Presidential Secretariat for Planning; Ministries of public health and social development; Presidential Secretariat for Executive Coordination	$1.9 million (1.7 million from regular resources and $0.2 million from other resources) Total for programme coordination and assistance: $1.2 million from regular resources

9